

WSU KING COUNTY MASTER GARDENER VOLUNTEER APPLICATION

Feel free to add a page if you need more space.

Application deadline is October 8, 2005. We are unable to consider applications postmarked after this date.

PLEASE PRINT OR TYPE ALL INFORMATION

Legal Name _____

I prefer to use the nickname _____ Home Phone () _____

Address _____ Work Phone () _____

City/ Zip _____ County **KING**

E-mail Address _____

VOLUNTEER EXPERIENCE *List most recent first. Note which of your volunteer experiences you enjoyed the most and why.*

Organization	Position title and responsibilities	Year(s)
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[illegible]

OCCUPATION(S) *Present, if employed; former, if retired* _____

PROFESSIONAL OR ORGANIZATIONAL AFFILIATIONS

OTHER INTERESTS

GARDENING BACKGROUND *List your interests, experience, and skills related to plants and gardening.***EXPERIENCE WORKING WITH SPECIAL POPULATIONS**☐ Children☐ Youth☐ Seniors☐ Individuals with disabilitiesDescribe your experience.

FLUENT IN LANGUAGES OTHER THAN ENGLISH? *Which? Spoken, written or both?*

How did you learn about the Master Gardener Program?

Have you been to a Master Gardener Plant Clinic or Demonstration Garden?

☐ Yes☐ No

Have you used Master Gardener services or other WSU Extension services?

☐ Yes☐ NoExplain

Have you been a WSU Extension volunteer? ☐ Yes ☐ No What program? _____

When? _____ City/County _____

Have you previously applied to become a WSU-King County Master Gardener? What year? _____

Have you been a Master Gardener in another county or state? Where? _____ When? _____

Name and contact information for your previous Program

Coordinator _____

SERVICE AREA Check the geographical area or areas in which you would be willing to work.

As much as possible we will try to assign you to your preferred area, but we also need to take into consideration the staffing needs of ongoing programs.

☐ North King County ☐ South Seattle/West Seattle ☐ South King County ☐ East King County ☐ Vashon Island

WASHINGTON STATE PATROL CRIMINAL HISTORY REPORTS To meet state regulations, all participants are required to complete a Washington State Patrol Criminal History Report before beginning work as Master Gardeners. If you are chosen to be a member of the class of 2004, you will be given this form to complete prior to final acceptance.

MASTER GARDENER TRAINING SESSIONS Training sessions are held on eleven consecutive Tuesdays from 8:30a.m. until 4 p.m., from January 4 to March 15. Will you be able attend all scheduled sessions? ☐ Yes ☐ No

REFERENCES List two persons not related to you who have knowledge of your qualifications related to this volunteer role. Choose people who know how you work with others. Please include complete addresses and daytime phone numbers.

Name _____ Day Phone () _____

Address _____
Street City State Zip

Name _____ Day Phone () _____

Address _____
Street City State Zip

I authorize contact of the above-listed references.

Signed _____ Date _____

Mail your completed application to:

Elaine Anderson
WSU Extension Coordinator
King County Master Gardener Program
919 SW Grady Way, Suite 120

Renton WA 98055